

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W.C.</i>		9/11/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>SL</i>	811	10/13/00
RESPONSE FORMALITY REVIEW	<i>HF</i>	829	11/27/00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	10-10-01
2	✓	✓	10-10-01
3	✓	✓	10-10-01
4	✓	✓	10-10-01
5	✓	✓	10-10-01
6	✓	✓	10-10-01
7	✓	✓	10-10-01
8	✓	✓	10-10-01
9	✓	✓	10-10-01
10	✓	✓	10-10-01
11	✓	✓	10-10-01
12	✓	✓	10-10-01
13	✓	✓	10-10-01
14	✓	✓	10-10-01
15	✓	✓	10-10-01
16	✓	✓	10-10-01
17	✓	✓	10-10-01
18	✓	✓	10-10-01
19	✓	✓	10-10-01
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42	✓	✓	10-10-01
43	✓	✓	10-10-01
44	✓	✓	10-10-01
45	✓	✓	10-10-01
46	✓	✓	10-10-01
47	✓	✓	10-10-01
48	✓	✓	10-10-01
49	✓	✓	10-10-01
50	✓	✓	10-10-01

Claim	Final	Original	Date
51	✓	✓	10-10-01
52	✓	✓	10-10-01
53	✓	✓	10-10-01
54	✓	✓	10-10-01
55	✓	✓	10-10-01
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64	✓	✓	10-10-01
65	✓	✓	10-10-01
66	✓	✓	10-10-01
67	✓	✓	10-10-01
68	✓	✓	10-10-01
69	✓	✓	10-10-01
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74	✓	✓	10-10-01
75	✓	✓	10-10-01
76	✓	✓	10-10-01
77	✓	✓	10-10-01
78	✓	✓	10-10-01
79	✓	✓	10-10-01
80	✓	✓	10-10-01
81	✓	✓	10-10-01
82	✓	✓	10-10-01
83	✓	✓	10-10-01
84	✓	✓	10-10-01
85	✓	✓	10-10-01
86	✓	✓	10-10-01
87	✓	✓	10-10-01
88	✓	✓	10-10-01
89	✓	✓	10-10-01
90	✓	✓	10-10-01
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92	✓	✓	10-10-01
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97	✓	✓	10-10-01
98	✓	✓	10-10-01
99	✓	✓	10-10-01
100	✓	✓	10-10-01

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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